Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1::	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1,	You	r full name		
	Write	e the name that is on	Cheryn	
	pictu	government-issued ure identification (for nple, your driver's	First name	First name
	licen	se or passport).	Middle name	Middle name
		g your picture	Roff	
		tification to your ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	used Inclu	other names you have d in the last 8 years ade your married or den names.		
3.	your num Indi	y the last 4 digits of r Social Security Iber or federal vidual Taxpayer tification number I)	xxx-xx-3905	

Filed 09/30/19 Entered 09/30/19 13:03:57 Case 2:19-bk-21516-BR Doc 1

Page 2 of 55 Main Document Debtor 1 Cheryn Roff Case number (if known) **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 776 Mansfield Dr. Claremont, CA 91711 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Los Angeles County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this above, fill it in here. Note that the court will send any notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for

bankruptcy

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Des

Main Document Page 3 of 55 Debtor 1 Cheryn Roff Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When District Case number District When Case number District When Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you District When Case number, if known

11. Do you rent your

residence?

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

Go to line 12.

No. Go to line 12.

this bankruptcy petition.

■ No.

☐ Yes.

12			You Own as a Sole Pro					
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Name and location of	business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number, Street, City, State & ZIP Code				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City,					
	it to this petition.			e box to describe your business:				
				usiness (as defined in 11 U.S.C. § 101(27A))				
				Real Estate (as defined in 11 U.S.C. § 101(51B))				
			Stockbroker (a	as defined in 11 U.S.C. § 101(53A))				
				oker (as defined in 11 U.S.C. § 101(6))				
			☐ None of the above					
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must				the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	■ No.	l am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the B. Code.					
			Lam filing under Char	eter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
		TYes.	· · · · · · · · · · · · · · · · · · ·					
Par	Report if You Own or							
Par 14.		Have Any		Any Property That Needs Immediate Attention				
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to							
	Do you own or have any property that poses or is alleged to pose a threat of imminent and	Have Any ■ No.	r Hazardous Property or	Any Property That Needs Immediate Attention				

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57

Page 6 of 55 Case number (if known) Main Document Debtor 1 Cheryn Roff Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes, Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. □ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 1-49 **25,001-50,000** you estimate that you □ 5001-10.000 **50,001-100,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 100-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion

□ \$50,000,001 - \$100 million

□ \$100,000,001 - \$500 million

□ \$1,000,001 - \$10 million

□ \$10,000,001 - \$50 million

□ \$50,000,001 - \$100 million

□ \$100,000,001 - \$500 million

be worth?

20. How much do you

to be?

estimate your liabilities

\$100,001 - \$500,000

□ \$500,001 - \$1 million

550,001 - \$100,000

\$100,001 - \$500,000

□ \$500,001 - \$1 million

□ \$0 - \$50,000

□ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

☐ More than \$50 billion

□ \$500,000,001 - \$1 billion

\$1,000,000,001 - \$10 billion

□ \$10,000,000,001 - \$50 billion

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc Main Document Page 7 of 55

-		3.5	
Fill in this information to	identify your case:		
United States Bankruptcy	Court for the:		
CENTRAL DISTRICT OF	CALIFORNIA		
Case number (If known)		Chapter you are filing under:	
		Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		☐ Chapter 13	☐ Check if this an amended filing
would be yes if either dek between them. In joint ca all of the forms. Be as complete and accu	tor owns a car. When information is rese, one of the spouses must report in rate as possible. If two married people ach a separate sheet to this form. On	needed about the spouses separately, the formation as <i>Debtor 1</i> and the other as are filing together, both are equally rest the top of any additional pages, write years.	f a form asks, "Do you own a car," the answer the form uses <i>Debtor 1</i> and <i>Debtor 2</i> to distinguish <i>Debtor 2</i> . The same person must be <i>Debtor 1</i> in sponsible for supplying correct information. If our name and case number (if known). Answer
For you	I have examined this petition, an	d I declare under penalty of perjury that the	information provided is true and correct.
	If I have chosen to file under Cha United States Code. I understan	apter 7, I am aware that I may proceed, if e d the relief available under each chapter, a	ligible, under Chapter 7, 11,12, or 13 of title 11, nd I choose to proceed under Chapter 7.
	If no attorney represents me and document, I have obtained and r	I did not pay or agree to pay someone whead the notice required by 11 U.S.C. § 342	o is not an attorney to help me fill out this (b).
	I request relief in accordance wit	h the chapter of title 11, United States Cod	e, specified in this petition.
*	I understand making a false state bankruptcy case can result in fin and 3571.	ement, concealing property, or obtaining mes up to \$250,000, or imprisonment for up	oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
	Cheryn Roff Signature of Debtor 1	Signature of	Debtor 2

Executed on

MM / DD / YYYY

Executed on

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc Main Document Page 8 of 55 Case number (if known)

Debtor 1 Cheryn Roff

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. 1, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Signature of Attorney for Debtor

Date

7/*50//* MM/DD/YYYY

Todd Turoci 160059

Printed name

THE TUROCI FIRM

Firm name

3845 Tenth Street Riverside, CA 92501

Number, Street, City, State & ZIP Code

Contact phone (888) 332-8362

Email address

mail@theturocifirm.com

160059 CA
Bar number & State

Official Form 101

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

	and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whon assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
No	one.
2.	(If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, lis any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
3. Ne	(If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an office of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whethe still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
INC	ne.
4.	(If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prio proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/E that was filed with any such prior proceeding(s).)
No	ne.
l de	eclare, under penalty of perjury, that the foregoing is true and correct.
Fx	ecuted at Riverside California (M/2/11)

Signature of Debtor 2

Signature of Debtor 1

Cheryn Roff

Date:

Case 2:19-bk-21516-BR Filed 09/30/19 Entered 09/30/19 13:03:57 Doc 1 Fill in this information to identify your case: Debtor 1 Cheryn Roff First Name Middle Name Last Name Debtor 2 First Name (Spouse If, filing) Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number (if known) ☐ Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 337,277.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 59,371.00 1c. Copy line 63, Total of all property on Schedule A/B..... 396,648.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 172,494.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 5,200.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 66,742.00 Your total liabilities 244,436.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 2.160.40 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 2.569.50 Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Case 2:19-bk-21516-BR Page 11 of 55 Pages number (if known) Main Document

Debtor 1 Cheryn Roff

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,680.44

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,200.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	5,200.00

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Fill in this information to identify your case and this filing: Debtor 1 Cheryn Roff First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1.1 What is the property? Check all that apply 776 Mansfield Dr. Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative ■ Manufactured or mobile home Current value of the Current value of the Claremont CA 91711-0000 ☐ Land entire property? portion you own? City ZIP Code State Investment property \$337,277.00 \$337,277.00 Timeshare Describe the nature of your ownership interest П Other (such as fee simple, tenancy by the entireties, or Who has an interest in the property? Check one a life estate), if known. Debtor 1 only Los Angeles ☐ Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: Needs new kitchen and carpet. Nothing has been updated since the 1987

Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

\$337,277.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case 2:19-bk-21516-BR Debtor 1 Cheryn Roff	Doc 1 Filed 09/30/19 Entered Main Document Page 13 of 55	09/30/19 13:03:5 e number <i>(if known)</i>	57 Desc
3. Cars, vans, trucks, tractors, sport utility ve	hicles, motorcycles		
□ No			
■ Yes			
■ Yes			
3.1 Make: Honda	Who has an independ to the annual O	Do not deduct secured of	laims or exemptions. Put
Model: Civic	Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
Year: 2010	■ Debtor 1 only □ Debtor 2 only	Creators vino Have Clai	lms Secured by Property.
Approximate mileage: 80,000	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other information:	☐ At least one of the debtors and another	and property:	portion you own:
Location: 776 Mansfield Dr.,			
Claremont CA 91711	☐ Check if this is community property	\$3,861.00	<u> </u>
Sitck not automatic	(see instructions)		
pages you have attached for Part 2. Write to Part 3: Describe Your Personal and Household Ite Do you own or have any legal or equitable into 6. Household goods and furnishings Examples: Major appliances, furniture, linens, □ No	erest in any of the following items?	=>	\$3,861.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
Yes. Describe			
Household Good Location: 776 M	ds, Appliances, Computer, and Furnishings ansfield Dr., Claremont CA 91711		\$2,000.00
including cell phones, cameras, mo ☐ No ☐ Yes. Describe Electronics	o, stereo, and digital equipment; computers, printers edia players, games ansfield Dr., Claremont CA 91711	, scanners; music collecti	ons; electronic devices
other collections, memorabilia, coll ☐ No ■ Yes. Describe Books, Records		bjects; stamp, coin, or ba	seball card collections;
Equipment for sports and hobbies	d other hobby equipment; bicycles, pool tables, golf o	clubs, skis; canoes and ka	yaks; carpentry tools;

Debtor 1	Case 2:19-bk-21 Cheryn Roff			Filed 09/ ocument	30/19 Page	Entered 0 e 14 of 55 _{e r}	9/30/19 13 number <i>(if known,</i>	3:03:57	Desc
■ Yes	Describe								
		ographic Equation: 776 Ma							\$150.00
		ts and Hobby ition: 776 Ma			: CA 9171	1			\$150.00
■ No	ples: Pistols, rifles, shotg . Describe	uns, ammunitio	n, and relat	ed equipment					
<i>Exam</i> □ No -	<i>ples:</i> Everyday clothes, f	urs, leather coa	ts, designer	wear, shoes, a	accessories	;			
	Pers Loca	onal and Fan ition: 776 Ma	nily Clothi nsfield Dr	ng ., Claremont	CA 9171	1	·		\$800.00
□ No	ples: Everyday jewelry, o Describe Jewe						watches, gems,	gold, silver	\$1,000.00
Exam ■ No	arm animals ples: Dogs, cats, birds, h Describe	orses							
■ No	ther personal and hous Give specific informatio	·	ou did not a	lready list, inc	aluding any	y heaith aids yo	ou did not list		
	the dollar value of all o art 3. Write that numbe						ve attached		\$5,250.00
Part 4: De	escribe Your Financial Ass	ets							
Do you o	wn or have any legal or	equitable inter	rest in any	of the followir	ig?			portio Do not	nt value of the on you own? t deduct secured or exemptions.
□ No	<i>ples:</i> Money you have in			-		on hand when y	ou file your peti	tion	
■ Yes.				***************************************					
						Ca	sh		\$50.00
	sits of money ples: Checking, savings, institutions. If you h						ions, brokerage	houses, and	other similar

D	ebtor 1	Case 2:19-b	k-215	16-BR		Filed 09/30/19 Entered 09/30/19 13:03:57 ocument Page 15 of 55 number (if known)	Desc
	■ Yes	S				Institution name:	200.00
			17.1.	Checking	J Account	Location: Wells Fargo	\$200.00
	-		17.2.	Savings <i>i</i>	Account	Location: Cal Tech Bank	\$10.00
18.		s, mutual funds, o <i>aples:</i> Bond funds, i				ge firms, money market accounts	
				Institution or	issuer name	e:	
19.	joint ■ No	venture				d and unincorporated businesses, including an interest in an LL	C, partnership, and
	☐ Yes	. Give specific infor		about them ne of entity:		% of ownership:	
	Nego Non-i ■ No	tiable instruments ir	nclude p nts are	ersonal ched hose you ca	cks, cashiers	e and non-negotiable instruments ' checks, promissory notes, and money orders. ' to someone by signing or delivering them.	
	Exam □ No	ement or pension a aples: Interests in IR . List each account	iccount A, ERIS separat	SA, Keogh, 4	01(k), 403(b)), thrift savings accounts, or other pension or profit-sharing plans Institution name:	
			403 A	account		403 Account TIAA Not property of the Estate. See 11 U.S.C. 541 (c)(2) and Patterson -vs- Schumate 504 U.S. 753, 112 S. Ct. 2242 (1992)	\$50,000.00
22.	Your Exam	rity deposits and p share of all unused aples: Agreements v	deposit	s you have n	nade so that d rent, public	you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies, or oth	ers
	■ No □ Yes					Institution name or individual:	
23.	Annui ■ No	ities (A contract for	a period	lic payment o	of money to y	you, either for life or for a number of years)	
		lsst	ier nam	e and descri _l	otion.		
24.	Interes 26 U.S ■ No	sts in an education i.C. §§ 530(b)(1), 52	I RA, ir 9A(b), a	an accoun and 529(b)(1	t in a qualifi).	ed ABLE program, or under a qualified state tuition program.	
	☐ Yes	lnst	itution n	ame and des	scription. Sep	parately file the records of any interests.11 U.S.C. § 521(c):	
	■ No	s, equitable or futu . Give specific infor				than anything listed in line 1), and rights or powers exercisable f	or your benefit
	Paten	ts, copyrights, trac	demark	s, trade sec	rets, and oth	ner intellectual property om royalties and licensing agreements	
	■ No	. Give specific infor				om royalues and licensing agreements	

Debtor	Cheryn Roff	Main Document	Page 16 of 55 number (if known)	
	amples: Building permits,	ther general intangibles exclusive licenses, cooperative association	holdings, liquor licenses, professional license	es
	o es. Give specific informat	ion about them		
Money	or property owed to you	17		Current value of the
	or property ented to year			portion you own? Do not deduct secured claims or exemptions.
28. Tax ■ No	refunds owed to you			
□ Ye	es. Give specific information	on about them, including whether you alread	dy filed the returns and the tax years	
	•	sum alimony, spousal support, child suppor	t, maintenance, divorce settlement, property	settlement
	es. Give specific information	on		
	benefits; unpaid to		its, sick pay, vacation pay, workers' compen	sation, Social Security
	es. Give specific informat	on		
			SA); credit, homeowner's, or renter's insuran	ce
■ Y€		ompany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		Term Life Insurance Policy Throug work no cash value	Children	\$0.00
If yo som ■ No	ou are the beneficiary of a neone has died.		rance policy, or are currently entitled to rece	ive property because
	<i>mples:</i> Accidents, employ	whether or not you have filed a lawsuit ment disputes, insurance claims, or rights to		
□ Ye	es. Describe each claim			
■ No			counterclaims of the debtor and rights to	set off claims
35. Any	financial assets you did			
■ No	o es. Give specific informati	on		
		of your entries from Part 4, including any er here		\$50,260.00
Part 5:	Describe Any Business-Re	ated Property You Own or Have an Interest in.	List any real estate in Part 1.	
37. Do yo	ou own or have any legal or	equitable interest in any business-related pro	perty?	
_	Go to Part 6.	•		

Schedule A/B: Property

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc

Official Form 106A/B

Deb	Case 2:19-bk-21516-BR	Doc 1 Main Do	Filed 09/3 ocument	30/19 Page	Ent • 17	tered 09/30/19 13:03:5 of 55 _{e number (If known)}	57 Desc
	Yes. Go to line 38.						
Part	6: Describe Any Farm- and Commercial Fishir If you own or have an Interest in farmland, list	ng-Related Pro it in Part 1.	perty You Own o	or Have an	Interes	st In.	
46. C	Oo you own or have any legal or equitable	interest in a	ny farm- or co	mmercial	fishin	ng-related property?	
	No. Go to Part 7.						
	☐ Yes. Go to line 47.						
Part	7: Describe Ali Property You Own or Hav	e an Interest ir	n That You Did N	ot List Ab	ove		
	Do you have other property of any kind yo Examples: Season tickets, country club mem No I Yes. Give specific information	nbership	·	nhor hora			****
V 1.	Add the deliai value of all of your entires	montrait 7.	witte that hun	iinei ilete			\$0.00
Part	List the Totals of Each Part of this Form	<u>.</u>					
55.	Part 1: Total real estate, line 2	***************************************	***************************************	************			\$337,277.00
56.	Part 2: Total vehicles, line 5			\$3,861	.00	-	
57.	Part 3: Total personal and household iter	ns, line 15		\$5,250).00		
58.	Part 4: Total financial assets, line 36			\$50,260	00.0		
	Part 5: Total business-related property, li			\$0	0.00		
60.	Part 6: Total farm- and fishing-related pro	perty, line 5	2	\$0	0.00		
61.	Part 7: Total other property not listed, line	e 54	+	\$0	0.00		
62.	Total personal property. Add lines 56 throu	ugh 61		\$59,371	.00	Copy personal property total	\$59,371.00
63.	Total of all property on Schedule A/B. Ad	d line 55 + line	e 62				\$396,648.00

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc

Fill in this inforn	nation to identify your	case:	meni pane ix ni	
Debtor 1	Cheryn Roff First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	CENTRAL DISTRICT C	OF CALIFORNIA	
Case number (if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

το τ	he applicable statutory amount.					
Pa	rt 1: Identify the Property You Claim as E	xempt				
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.		
	You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exc	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	776 Mansfield Dr. Claremont, CA 91711 Los Angeles County	\$337,277.00		\$175,000.00	C.C.P. § 704.730	
	Needs new kitchen and carpet. Nothing has been updated since the 1987 Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit		
	2010 Honda Civic 80,000 miles Location: 776 Mansfield Dr.,	\$3,861.00		\$3,325.00	C.C.P. § 704,010	
	Claremont CA 91711 Sitck not automatic Line from Schedule A/B: 3.1	· · · · · · · · · · · · · · · · · · ·		100% of fair market value, up to any applicable statutory limit		
	Household Goods, Appliances, Computer, and Furnishings	\$2,000.00		\$2,000.00	C.C.P. § 704.020	
	Location: 776 Mansfield Dr., Claremont CA 91711 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Electronics Location: 776 Mansfield Dr.,	\$1,000.00		\$1,000.00	C.C.P. § 704.020	
	Claremont CA 91711 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		

Debtor 1	Case 2:19-bk-21516-BR Cheryn Roff	Doc 1 Filed Main Docume		30/19 Entered 09/30/1 Page 19 of 55 Page 19 ase number (if known)	
Brie	of description of the property and line on edule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		count of the exemption you claim	Specific laws that allow exemption
	oks, Records, CD's, Pictures cation: 776 Mansfield Dr.,	\$150.00		\$150.00	C.C.P. § 704.020
Cla	aremont CA 91711 e from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	
	otographic Equipment, Supplies,	\$150.00		\$150.00	C.C.P. § 704.020
Cla	cation: 776 Mansfield Dr., aremont CA 91711 e from <i>Schedule A/B</i> : 9.1			100% of fair market value, up to any applicable statutory limit	
	orts and Hobby Equipment cation: 776 Mansfield Dr.,	\$150.00		\$150.00	C.C.P. § 704.020
Cla	remont CA 91711 e from <i>Schedule A/B</i> : 9.2			100% of fair market value, up to any applicable statutory limit	
	rsonal and Family Clothing cation: 776 Mansfield Dr.,	\$800.00		\$800.00	C.C.P. § 704.020
Cla	remont CA 91711 e from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	
	velry cation: 776 Mansfield Dr.,	\$1,000.00		\$1,000.00	C.C.P. § 704,040
Cla	remont CA 91711 e from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	
Ch Far	ecking Account: Location: Wells	\$200.00		\$200.00	C.C.P. § 704.080
	e from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Sav Bai	vings Account: Location: Cal Tech	\$10.00		\$10.00	C.C.P. § 704.080
Line	e from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Account: 403 Account TIAA property of the Estate. See 11	\$50,000.00		\$50,000.00	C.C.P. § 704.115(a)(1) & (2), (b)
U.S and U.S	i.C. 541 (c)(2) I Patterson -vs- Schumate 504 i. 753, 112 S. Ct. 2242 (1992) I from <i>Schedule A/B</i> : 21.1			100% of fair market value, up to any applicable statutory limit	(-)
	m Life Insurance Policy oug work no cash value	\$0.00		\$0.00	C.C.P. § 704.130
Ber	neficiary: Children from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3. Are (Sul □	you claiming a homestead exemption object to adjustment on 4/01/22 and every to No Yes. Did you acquire the property covered No Yes	3 years after that for ca	ses fil	•	•

Case 2:19-bk-21516-BR Filed 09/30/19 Entered 09/30/19 13:03:57 Doc 1 Fill in this information to identify your case: Debtor 1 Cheryn Roff First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space Is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? □ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form, Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. that supports this Do not deduct the portion value of collateral. claim if any 2.1 | Chase Mortgage Describe the property that secures the claim: \$151,245.00 \$337,277.00 \$0.00 Creditor's Name 776 Mansfield Dr. Claremont, CA 91711 Los Angeles County Needs new kitchen and carpet. Nothing has been updated since the 1987 Attn: Bankruptcy Dept As of the date you file, the claim is: Check all that Po Box 24696 apply. Columbus, OH 43224 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only ☐ Statutory lien (such as tax llen, mechanic's fien) Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Opened 11/10 Last Active

Date debt was incurred

5/24/19

Last 4 digits of account number

☐ Judgment lien from a lawsuit

Other (including a right to offset)

8339

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc Main Document Page 21 of 55

Debtor 1 Cheryn Roff		Case number (If known)		
First Name Middle N	Name Last Name			
2.2 Equity Experts	Describe the property that secures the clair	n: \$21,249.00	\$337,277.00	\$12,000.00
Creditor's Name	776 Mansfield Dr. Claremont, CA			
c/oThe Club	91711 Los Angeles County			
Homeowners	Needs new kitchen and carpet.			
Association	Nothing has been updated since			
6632 Telegraph Road,	the 1987			
Suit #339	As of the date you file, the claim is: Check all	that		
Bloomfield Hills, MI	apply.			
48301	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage)	e or secured		
☐ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory llen (such as tax lien, mechanic's	llen)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	•		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Owners Association		
Date debt was Incurred	Last 4 digits of account number)742		
		A +== += +	1	
-	Column A on this page. Write that number here	\$172,494.	00	
If this is the last page of your form, add	the dollar value totals from all pages.	\$172,494.	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc.

Debtor 1 Cheryn Roff First Name Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number Whown) Check if this is an amended filling Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIQRITY claims and Part 2 for creditors with NOMPRIORITY claims. List the other party to my executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AIB: Property (Official Form 106A/B) and on chedule 6: Executory Contracts and Unexpired Leases (Official Form 108G). Do not include any creditors with partially secured claims that real isted in eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (If known). Part 1: List All lof Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount.		Ouse	L.10 DK LIGIO	Main Doci	ment Page 22	of 55	10.00.01	D 000
Debtor 2 Speaze If, filing) Find Name Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to my executory contracts or unexprised leases that could result in a claim. Also list executory contracts on Schedule Als: Property (Official Form 106B/p) and on claims of the country of the C	Fifti	in this inform	ation to identify your ca					
Debtor 2 Spower I, filing First Name Midde Name Last Name Debtor 2 Spower I, filing First Name Midde Name Last Name Central District OF CALIFORNIA	Deb	tor 1	Chervn Roff	··-	*****			
United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number Central				Middle Name	Last Name			
Case number Check if this is an armended filling Check Indicated Indicated Check Indicated Indicated Check Indicated Check Indicated Check Indicated Check Indicated Check Indicated Indicate			First Name	Middle Name	Last Name			
Check if this is an amended filling	Unite	ed States Ban	kruptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA			
Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIQRITY claims and Part 2 for creditors with NONPRIQRITY claims. List the other party to my executory contracts or unexpired leases (thick design of the property (Official Form 106X)) and on checkled and property of the party of the party of the party contracts or checkled and the property of the party of the party of the party contracts or schedule ARIS (Property Clifical Form 106X) bo not include any creditors with partially secured claims that are listed in the party of the party on red, fill it out, number the entries in the boxes on the standard of the page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your area and case number (if known). 26731 List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2.							_	
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to my executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 1660), Do not include any creditors with that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 1660), Do not include any creditors with the vector (Official Form 1660). Do not include any creditors with the vector claims secured by Property, if more space is needed, copy the Part you need, fall it out, number the entries in the boxes on the sit. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your area and case number (if known). Part II List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. 1. Exist all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, as much as possible, list the claims in alphabetical order according to the creditors name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) 1. Total claim Priority amounts. As much as possible, list the claims in alphabetical order according to the receditors amount amoun	Offi	oial Form	1065/5		<u> </u>			
lea s complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to my executory contracts on schedule Als: Property (Official Form 106A/S) and on schedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that an listed in chedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that an listed in stratch the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured daim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, As much as possible, list the claims in aphabetela order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor bolds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Franchise Tax Board Last 4 digits of account number Priority Creditor's Name Barkruptcy Section, MS: A-340 PO Box 3952 Sacramento, CA 95812-2952 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only		***		o Have Unsec	ured Claims			12/15
1. Do any creditors have priority unsecured claims against you? □ No. Go to Part 2. ■ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount Nonpriority amount Priority Creditor's Name Bankruptcy Section, MS: A-340 PO Box 3952 Sacramento, CA 95812-2952 Number Street City State Zip Code Who incurred the debt? Check one. □ Contingent □ Debtor 1 only □ Unliquidated □ Debtor 2 only □ Disputed □ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Disputed □ Contingent □ Domestic support obligations □ Taxes and certain other debts you we the government list the claim subject to offset? □ No □ Other, Specify	Sched Sched left. A name	dule G: Executoriule D: Creditor ttach the Conti and case numl	ory Contracts and Unexpirers Who Have Claims Secur inuation Page to this page. ber (If known).	ed Leases (Official Form ed by Property. If more s If you have no informati	106G). Do not include any o space is needed, copy the P	reditors with partially s art you need, fill it out, i	ecured claims that a number the entries i	nre listed in
No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amounts. As much as possible, list the continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amounts. As much as possible, list the claim is for a community debt is the claim subject to offset? In the creditor's name. It is the claim is for a community debt is the claim subject to offset?			***					
List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name, if you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Franchise Tax Board Priority Creditor's Name Bankruptcy Section, MIS: A-340 PO Box 3952 Sacramento, CA 95812-2952 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Other. Specify Other. Specify	_			claims against you?				
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount. Nonpriority amount. Priority amount Nonpriority amount. Nonpriority amount			rt 2.					
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount Nonpriority amount \$0.00 \$0.0	2. L	ist all of your podentify what type cossible, list the	e of claim it is. If a claim has claims in alphabetical order	both priority and nonpriorit according to the creditor's	ly amounts, list that claim here name. If you have more than	and show both priority a	nd nonpriority amoun	ts. As much as
Franchise Tax Board Last 4 digits of account number \$0.00 \$0.00 \$0.00			•	,				
Priority Creditor's Name Bankruptcy Section, MS: A-340 PO Box 3952 Sacramento, CA 95812-2952 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Debtor 1 only Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated No Other, Specify						Total claim	•	
Bankruptcy Section, MS: A-340 PO Box 3952 Sacramento, CA 95812-2952 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Is the claim subject to offset? No Other. Specify Other. Specify	2.1			Last 4 digits of	of account number	\$0.00	\$0.00	\$0.00
Number Street City State Zip Code Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply Check all that apply Check all that apply As of the date you file, the claim is: Check all that apply		Bankrup	tcy Section, MS: A-34	40 When was the	e debt incurred?	- 		
Who incurred the debt? Check one. Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Contingent Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify								
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Debtor 1 only Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			•			k all that apply		
□ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: □ At least one of the debtors and another □ Domestic support obligations □ Check if this claim is for a community debt Is the claim subject to offset? □ Claims for death or personal injury while you were intoxicated ■ No □ Other. Specify □ Claims				☐ Contingent				
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Other. Specify □ Other. Specify		Debtor 1 on	lly	☐ Unliquidate	ed			
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ No		Debtor 2 on	ly	☐ Disputed				
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ No ☐ Other. Specify		Debtor 1 and	d Debtor 2 only	Type of PRIOI	RITY unsecured claim:			
Is the claim subject to offset? Claims for death or personal injury while you were intoxicated No Other. Specify		☐ At least one	of the debtors and another	☐ Domestic s				
Is the claim subject to offset? Claims for death or personal injury while you were intoxicated No Other. Specify		_			upport obligations			
		LI Check if thi	is claim is for a communit	y debt Taxes and	.,,,	ne government		
					certain other debts you owe to			
100 House Only		Is the claim su ■ No		☐ Claims for	certain other debts you owe ti death or personal injury while			

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Page 23 of 55 Main Document Debtor 1 Cheryn Roff Case number (if known) 2.2 Internal Revenue Service Last 4 digits of account number 3905 \$1,200.00 \$0.00 \$1,200.00 Priority Creditor's Name Official Noticing Address for BK When was the debt incurred? 2017 **POB 7346** Philadelphia, PA 19101-7346 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? Claims for death or personal injury while you were intoxicated. No. Other. Specify ☐ Yes **Taxes Owed** 2.3 Last 4 digits of account number 3905 Internal Revenue Service \$4,000.00 \$4,000.00 \$0.00 Priority Creditor's Name Official Noticing Address for BK When was the debt incurred? 2018 **POB 7346** Philadelphia, PA 19101-7346 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Domestic support obligations ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? Claims for death or personal injury while you were intoxicated. ■ No ☐ Other. Specify ☐ Yes Taxes Owed Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4: List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims aiready included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc Main Document Page 24 of 55

Cheryn Roff		Case number (if known)	
Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	8381	\$5,208.00
Attn: Correspondence Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	Opened 05/13 Last Active 4/02/19	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	Lalabore	
At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	i ciaim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Misc. Purch		
Caltech Employees Fcu	Last 4 digits of account number	5143	\$6,384.00
Nonpriority Creditor's Name 528 Foothill Blvd La Canada, CA 91011	When was the debt incurred?	Opened 09/07 Last Active 05/19	
Number Street City State Zip Code	 As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.		- Chook an dist apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Misc. Purch	nases	
Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	2996	\$956.00
Attn: Bankruptcy Po Box 15298	When was the debt incurred?	Opened 11/15 Last Active 5/24/19	
Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	ł claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		ration agreement or divorce that you did not	
No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
Yes	Other, Specify Misc. Purch	iases	

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc Main Document Page 25 of 55

Citibank/Best Buy	Last 4 digits of account number	4033	\$914.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 790441	When was the debt incurred?	Opened 6/15/12 Last Active 5/24/19	
St. Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir		
□ Yes	Other. Specify Misc. Purc		
Comenity Capital Bank/HSN	Last 4 digits of account number	1991	\$8,745.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125		Opened 06/09 Last Active 1/19/19	
Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
□ Check if this claim is for a community debt is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other Specify Misc. Purcl		
National Bank/Macy's	Last 4 digits of account number	7477	\$4,602.00
Nonpriority Creditor's Name Attn: Bankruptcy 2111 Duke Boulevard Mason, OH 45040	When was the debt incurred?	Opened 08/85 Last Active 4/02/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community lebt s the claim subject to offset?		aration agreement or divorce that you did not	
No	report as priority claims Debts to pension or profit-sharin	ng plans, and other similar debte	
- INC	- Done to pension or pronestianin	ig piano, and other similal debts	

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc Main Document Page 26 of 55
Case number (if known)

Cheryn κοπ		Case number (if known)	
Nordstrom FSB	Last 4 digits of account number	4895	\$5,235.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6555 Englewood, CO 80155	When was the debt incurred?	Opened 11/05 Last Active 05/19	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	➡ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other Specify Misc. Purc	hases	
SYNCB/Texaco	Last 4 digits of account number	3716	\$1,531.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 03/01 Last Active	
Po Box 965060	When was the debt incurred?	06/19	
Orlando, FL 32896	_		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Contingent☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No No	Debts to pension or profit-sharing		
Yes	Other Specify Misc. Purc	hases	
Synchrony Bank / HH Gregg Nonpriority Creditor's Name	Last 4 digits of account number	6796	\$8,828.00
Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 05/02 Last Active 5/15/19	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	ls: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	эт э	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other Specify Misc. Purc.		
	- Other Specify Image Wile		

Cneryn Rom		Case number (if known)	
Synchrony Bank/ JC Penneys Nonpriority Creditor's Name	Last 4 digits of account number	8082	\$7,607.00
Attn: Bankruptcy Po Box 956060 Orlando, FL 32896	When was the debt incurred?	Opened 10/85 Last Active 4/03/19	
Number Street City State Zip Code Who Incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:	
Check if this claim is for a community debt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Misc. Purch		
□ 165	Other, Specify Wisc. Furth	10505	
Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	3239	\$2,379.00
Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 06/09 Last Active 5/26/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unllquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset? 	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Misc. Purch	nases	
Synchrony Bank/QVC Nonpriority Creditor's Name	Last 4 digits of account number	1559	\$2,519.00
Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 07/09 Last Active 1/21/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset? —	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other Specify Misc. Purch	iases	

Debtor	Case 2:19-bk-21516-BR Cheryn Roff		Entered 09/30/19 13:03:57 e 28 of 55 Case number (If known)	Desc
4. 1 3	Synchrony Bank/Walmart	Last 4 digits of account number	7475	\$4,985.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 08/12 Last Active 5/05/19	
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Misc. Purc		
T	Verizon Wireless	Last 4 digits of account number	0001	\$162.00
	Nonpriority Creditor's Name Bankruptcy Admini 500 Technology Dr, Ste 550 Weldon Spring, MO 63304	When was the debt incurred?	Opened 01/11 Last Active	
_	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other, Specify Utility Serv	ices	
	Wells Fargo Bank NA	Last 4 digits of account number	8874	\$6,687.00
	Nonpriority Creditor's Name Attn: Bankruptcy		One and 07/44 1 and 0 -45	
	1 Home Campus Mac X2303-01a	When was the debt incurred?	Opened 07/14 Last Active 05/19	
	Des Moines, IA 50328			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	with incurred the dept? Check one.			

■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Misc. Purchases

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Page 29 of 55 case number (if known) Main Document

Debtor 1 Cheryn Roff

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only, 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6а.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 5,200,00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 5,200.00
Total	6f.	Student loans	6f.	\$ Total Claim
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 66,742.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 66,742.00

Ca	se 2:19-bk-21516	6-BR Doc 1 F		intered 09/30/19 1	3:03:57 Desc
Fill in this info	ormation to identify your				
Debtor 1	Cheryn Roff				
B. 14 . 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse If, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA		
Case number					
(if known)				:	Check if this is an amended filing
					·
Official F	orm 106G				
	e G: Executor	v Contracte a	nd Unovnirod	Loopoo	4844
				th are equally responsible	12/15
information. If	more space is needed, or es, write your name and	opy the additional page	e, fill it out, number the	entries, and attach it to th	is page. On the top of any
1. Do you ha	ave any executory contra	cts or unexpired lease:	s?		
No. Ch	eck this box and file this fo	orm with the court with yo	ur other schedules. You i	nave nothing else to report	on this form.
🗆 Yes. Fil	ll in all of the information b	elow even if the contacts	of leases are listed on So	chedule A/B:Property (Offic	ial Form 106 A/B).
example,	rately each person or cor rent, vehicle lease, cell p ired leases.	mpany with whom you bhone). See the instruction	have the contract or lead ons for this form in the inst	se. Then state what each truction booklet for more ex	contract or lease is for (for amples of executory contracts
Person o	or company with whom y Name, Number, Street, Clt		lease State what	the contract or lease is fo	or
2.1					
N ame					
Number	Street				
City	· · · · · · · · · · · · · · · · · · ·	State ZIP Cod	de		
2.2			TF-7/1-1/		

		Name, Number	, Street, City, State and ZIF	2 Code	
2.1					
	Name				
	Number	Street			
					<u> </u>
2.2	City		State	ZIP Code	
2.2	Name				
	INDING				
	Number	Street			<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street		, <u> </u>	
	Ott.		01-1-	710.0.1.	
2,4	City		State	ZIP Code	
2,7	Name				
	1441110				
	Number	Street			
	Hamboi	Outco			
	City		State	ZIP Code	
2.5					• P
	Name				
	Number	Street			
	City		State	ZIP Code	
	City		State	ZIF COUE	

Case 2:19-bk-21516-BR Filed 09/30/19 Entered 09/30/19 13:03:57 Doc 1 Main Document Page 31 of 55 Fill in this information to identify your case: Debtor 1 Cheryn Roff First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ■ No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? ■ No ☐ Yes. In which community state or territory did you live? -NONE-. Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number, Street, City, State & Zio Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D, line Name ☐ Schedule E/F, line Schedule G, line Number Street City State ZIP Code 3.2 ☐ Schedule D, line Name

Street

State

Number

City

ZIP Code

☐ Schedule E/F, line ☐ Schedule G, line ☐

	in the information to identify the second								
	in this information to identify your of the Cherryn Rofe								
De	btor 1 Cheryn Rof				_				
	ited States Bankruptcy Court for the	: CENTRAL DISTRICT	OF CALIFORNIA						
Ca	se number nown)		_			Check if this is: An amende A supplement	d filing	ng postpetitior	ı chapter
\cap	fficial Form 106I					13 income	as of the	following date:	
	chedule I: Your Inc	omo				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not fili Ir spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse infor	is living mation	g with you, inclu about your spo	ude info	rmation about	your
1.	Fill in your employment information.		Debtor 1			Debtor 2	ebtor 2 or non-filing spouse		
	If you have more than one job,		☐ Employed			☐ Employed			
	attach a separate page with information about additional	Employment status	Not employed			☐ Not employed			
	employers.	Occupation	<u>Unemployed</u>		 -				
	Include part-time, seasonal, or self-employed work.	Employer's name	- mana					***	
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?					*	, - .
Pai	t 2: Give Details About Mor	thly Income							
Esti spot	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any line	e, write \$0 in the	space. Ir	nclude your no	n-filing
lf yo mor	u or your non-filing spouse have mo e space, attach a separate sheet to	ore than one employer, co	ombine the informatio	n for all e	employe	ers for that perso	n on the	lines below. If	you need
					F	or Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	0.00	\$_	N/A	

Deb	or 1	Cheryn Roff	-	Case n	umber (if known)		
	Con	by line 4 here	4.	For t	Debtor 1 0.00		ebtor 2 or ling spouse N/A
_	•	-	٦.	Ψ	0.00	Ψ	N/A
5.		all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e. 5f.	Insurance	5e.	\$	0.00	ф	N/A
	5g.	Domestic support obligations Union dues	5f.	\$	0.00	\$	N/A
	5g. 5h.	Other deductions. Specify:	5g. 5h.+	· \$—	0.00	· ——	N/A
_			_		0.00		N/A
6. 		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	90	ď	0.00	¢	N/4
	8b.	Interest and dividends	8a. 8b.	φ	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Ψ	0.00	Φ	<u>N/A</u>
		settlement, and property settlement.	8c.	\$	0.00	\$	<u>N/A</u>
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	1,660.40	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	_ 8g.	\$	500.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+		0.00	- \$	N/A
			 				1
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,160.40	\$	N/A
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	2	,160.40 + \$	•	N/A = \$ 2,160.40
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	, ,		,100.40		2,100.40
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule add contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		nedule J. 11. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certalises					12. \$ 2,160.40 Combined
13.	Dov	ou expect an increase or decrease within the year after you file this form,	?				monthly income
		No.	•				
		Yes. Explain:					

Fill	in this information to identify your case:				
Del	oter1 Cheryn Roff		Check	dif this is:	
Dal	otor 2	<u> </u>	_	An amended filing	
	ouse, if filing)			supplement snow 3 expenses as of t	ing postpetition chapter he following date:
Uni	ted States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFO	RNIA	<u> </u>	/M / DD / YYYY	
Car	se number				
1	known)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1:
Be inf	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this t mber (if known). Answer every question.	e filing together, bot form. On the top of a	th are equal any addition	lly responsible for nal pages, write ye	r supplying correct our name and case
Pa 1	it1: Describe Your Household Is this a joint case?				
٠.	■ No. Go to line 2,				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate Househ	old of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	2 .	Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No
	череписта нашез.				□ Yes □ No
					☐ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include				☐ Yes
0.	expenses of people other than yourself and your dependents?				
Pa	t 2: Estimate Your Ongoing Monthly Expenses				
ex	timate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppolicable date.	ou are using this for lemental <i>Schedule</i> J	m as a sup , check the	plement in a Cha box at the top of	oter 13 case to report the form and fill in the
Inc	lude expenses paid for with non-cash government assistance if	you know	Booth to		
	value of such assistance and have included it on <i>Schedule I:</i> Y ficial Form 106I.)	our Income		Your expe	nses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		1,140.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hor	ne equity loans	5. \$		0.00

Cheryn Roff	Case num	ber (if known)	
ties:			
	6a	\$	80.00
• •			90.00
			0.00
		· ————	120.00
		T	60.00
		·	
			386.00
		·	0.00 40.00
		·	43.00
		·	
		Ψ	55.00
ot include car payments.	12.	\$	270.00
rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
ritable contributions and religious donations	14.	\$	0.00
		-	
			0.00
			0.00
			110.00_
	15d.	\$	0.00
	40	ф	
	16.	3	135.50
	170	ው	
···			0.00
• •			0.00
			0.00
	170.	Ф	0.00
report as set of all money, maintenance, and support that you did not report as set of from your nay on line 5. Schedule I. Your Income (Official Form 1061)	18.	\$	0.00
er payments you make to support others who do not live with you.			0.00
	19.	*	
er real property expenses not included in lines 4 or 5 of this form or on Sched		ur Income.	
Mortgages on other property			0.00
Real estate taxes	20b.	\$	0.00
Property, homeowner's, or renter's insurance	20c.	\$	0.00
Maintenance, repair, and upkeep expenses	20d.	\$	0.00
Homeowner's association or condominium dues	20e.	\$	0.00
r: Specify:	21.	+\$	0.00
			
			2,569.50
		\$	
Add line 22a and 22b. The result is your monthly expenses.		\$	2,569.50
ulate your monthly net income.			
	23a	\$	2,160.40
		· ·	2,160.40
, , , , , , , , , , , , , , , , , , ,	200.	T	2,008.00
Subtract your monthly expenses from your monthly income.			
The result is your monthly net income.	23c.	\$	-409.10
			
ou expect an increase or decrease in your expenses within the year after you	u file this	form?	
xample, do you expect to finish paying for your car loan within the year or do you expect your i loation to the terms of your mortgage?	mortgage i	payment to increase	or decrease because of a
, , ,			
V ₁			
	Ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cell Phone d and housekeeping supplies Idicare and children's education costs Ithing, laundry, and dry cleaning sonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books iritable contributions and religious donations irrance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify: Medical Insurance allment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: r payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). er payments you make to support others who do not live with you. cify: er real property expenses not included in lines 4 or 5 of this form or on Sched Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: cutate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. Suldate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy Jour monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your expenses within the year after your expense to an increase or decrease in your expenses within the year after your pour expenses.	Ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone do and housekeping supplies Idicare and children's education costs Ithing, laundry, and dry cleaning sonal care products and services Idical and dental expenses Idical Idi	Itiles: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services 6c. \$ Cher. Specify: Cable/ Internet 6d. \$ Cell Phone di and housekeeping supplies 7. \$ Idicare and children's education costs 8. \$ Ithing, laundry, and dry cleaning 9. \$ sonal care products and services 10. \$ Idical and dental expenses 11. \$ Internation. Include gas, maintenance, bus or train fare. 10 Include car payments. 11. \$ Internation. Include gas, maintenance, bus or train fare. 10 Include car payments. 11. \$ Internation. Include gas, maintenance, bus or train fare. 11. \$ Internation. Include gas, maintenance, bus or train fare. 12. \$ Internation. Include gas, maintenance, bus or train fare. 13. \$ Internation. Include gas, maintenance, bus or train fare. 14. \$ Internance 15. \$ Internance 16. \$ Internance 17. \$ Internance 18. \$ Internance 19. \$ Internance

Fill in this infor	mation to identify your	case:			
Debtor 1	Cheryn Roff				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case number (If known)				· —	Check if this is an Imended filing
Official Forr		ın İndividual	Debtor's Sc	hedules	12/15
if two married pe	eople are filing together	r, both are equally respon	nsible for supplying com	rect information.	
obtaining money	s form whenever you fil or property by fraud ir 8 U.S.C. §§ 152, 1341, 1	n connection with a bank	s or amended schedules. kruptcy case can result i	. Making a false statement, cond n fines up to \$250,000, or impris	ealing property, or onment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	eankruptcy forms?	
■ No					
☐ Yes. N	lame of person			Attach Bankruptcy Petiti Declaration, and Signat	
Under pena	Ity of perjury, I declare	that I have read the sum	mary and schedules filed	d with this declaration and	
that they are	true and correct.	0 10	•		
x Ch	erely 1	20XX	X		
					
Cheryn Signatur	n Roff/ re of Debtor 1	DV	Signature of i	Debtor 2	

information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before
Debtor 2 (Spouse if, filling) First Name Middle Name Last Name
(Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number (if known) Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?
Case number (if known) Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?
Case number (if known) Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?
Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married
Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married
1. What is your current marital status? Married
1. What is your current marital status? Married
Married —
2. During the last 3 years, have you lived anywhere other than where you live now?
NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.
Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there Dates Debtor 2
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)
■ No
Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).
Part 2 Explain the Sources of Your Income
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.
□ No
Yes. Fill in the details.
Debtor 1 Debtor 2
Sources of income Gross income Sources of income Gross income Check all that apply. (before deductions and exclusions) Gross income Check all that apply. (before deduction and exclusions)
From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$10,624.00 Under the Wages, commissions, bonuses, tips
☐ Operating a business ☐ Operating a business

Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Case 2:19-bk-21516-BR Main Document

Page 38 of 55 Case number (# known) Debtor 1 Cheryn Roff Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$28,630.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$39,875.00 □ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings, if you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. ☐ No Yes, Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until **Social Security** \$14,943.00 the date you filed for bankruptcy: **Benefits** Pension income \$5,400.00 For last calendar year: Social Security \$19,375.00 (January 1 to December 31, 2018) **Benefits** Pension income \$8,589.00 For the calendar year before that: **Social Security** \$18,937.00 (January 1 to December 31, 2017) **Benefits** Pension income \$8.589.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

	Case 2:19-bk-21516-BR	Doc 1 Filed 09/3 Main Document	30/19 Enter	ed 09/30/19	13:03:57 Desc
De	btor 1 Cheryn Roff	Main Document	- age 39 Oi	55 se number (# known)	
	_				
	Yes. Debtor 1 or Debtor 2 or both har During the 90 days before you file			al of \$600 or more?	
	☐ No. Go to line 7.				
	Yes List below each credit	domestic support obligation	of \$600 or more and s, such as child sup	d the total amount port and alimony. <i>i</i>	you paid that creditor. Do not Also, do not include payments to an
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Chase Mortgage	Last 90 Days	\$3,420.00	\$151,245.00	■ Mortgage
	Attn: Bankruptcy Dept	\$1140 x 3 Months			□ Car
	Po Box 24696 Columbus, OH 43224				☐ Credit Card
	Columbus, On 43224				☐ Loan Repayment
					☐ Suppliers or vendors
					Other
	Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony. No Yes. List all payments to an insider.	control, or owner of 20% or	more of their voting	securities: and ar	v managing agent, including one for
	Insider's Name and Address	Dates of payment	Total amount	A	Degrap for this way and
	msider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankruptinsider? Include payments on debts guaranteed or cos		ments or transfer a	iny property on a	ccount of a debt that benefited an
	■ No □ Yes. List all payments to an insider				
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Passan for this navement
	nisidel 3 Name and Addless	Dates of payment	paid	still owe	Reason for this payment Include creditor's name
Pai	t'4: Identify Legal Actions, Repossession	ns and Foreclosures			
9.	Within 1 year before you filed for bankrupt. List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in an	y lawsuit, court ac s, divorces, collectio	tion, or administra n suits, paternity a	ative proceeding? ctions, support or custody
	No Yes, Fill in the details.				
	Case title	Natura of the sees	Cat a		04-4
	Case number	Nature of the case	Court or agency		Status of the case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below	cy, was any of your prope w.	rty repossessed, f	oreclosed, garnis	hed, attached, seized, or levied?
	■ No. Go to line 11. □ Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the
		Evolain what bannened			property
		Explain what happened			

Deb	otor 1	Cheryn Roff	Main Document	Page 40 of 55	(if known)	
					· · · · · · · · · · · · · · · · · · ·	
11.	accou	n 90 days before you filed for bank unts or refuse to make a payment No		uding a bank or financial in	stitution, set off any a	nmounts from your
	□ Y	∕es. Fill in the details.				
	Cred	itor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
12.		n 1 year before you filed for bankr appointed receiver, a custodian, c		rty in the possession of an	assignee for the bene	efit of creditors, a
	_	√os				
Par	t 5:	List Certain Gifts and Contributio	ns			
13		n 2 years before you filed for bank		with a total value of more t	han \$600 per percont	
10.		No Yes. Fill in the details for each gift.	auptoy, and you give any gifts	with a total value of more t	iran 4000 per person	
	Gifts	with a total value of more than \$6 erson	00 Describe the gifts	·	Dates you gave the gifts	Value
	Perso Addr	on to Whom You Gave the Gift and	d			
14.	II	n 2 years before you filed for bank		or contributions with a total	al value of more than	\$600 to any charity?
		es. Fill in the details for each gift or			Date :	
	more Char	or contributions to charities that than \$600 ity's Name ess (Number, Street, City, State and ZIP Coo	•	contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses				
15.		n 1 year before you filed for bankr mbling?	uptcy or since you filed for b	ankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	_	No Yes. Fill in the details.				
		ribe the property you lost and the loss occurred	Describe any insurance con Include the amount that insurance claims on line 33 of	ance has paid. List pending	Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfer	rs			
	consu	n 1 year before you filed for bankru ulted about seeking bankruptcy or e any attorneys, bankruptcy petition	preparing a bankruptcy petit	tion?		rty to anyone you
		io				
		es. Fill in the details.				
	Addr Emai	on Who Was Paid ess I or website address on Who Made the Payment, if Not`	transferred	lue of any property	Date payment or transfer was made	Amount of payment
	THE 3845 Rive	TUROCI FIRM 5 Tenth Street rside, CA 92501 @theturocifirm.com	Attorney Fees		Prior to filing	\$1,500.00

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc

Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57

Main Document

Case 2:19-bk-21516-BR

De	btor 1	Cheryn Roff	Main Document Page 42	of 55 Case number (# known)	7 DC30
Pa	rt 9:	Identify Property You Hold or Contro	ol for Someone Else		
23.	Do y		omeone else owns? Include any proper	ty you borrowed from, are storing	ı for, or hold in trust
		No			
		Yes. Fill in the details.			
		ner's Name Iress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pa	rt 10:	Give Details About Environmental in	formation		
For	the p	urpose of Part 10, the following definit	ions apply:		
=	toxic	ronmental law means any federal, stat substances, wastes, or material into lations controlling the cleanup of thes	e, or local statute or regulation concerr the air, land, soil, surface water, ground e substances, wastes, or material.	ning pollution, contamination, rele dwater, or other medium, includin	ases of hazardous or g statutes or
		means any location, facility, or proper wn, operate, or utilize it, including disp	ty as defined under any environmental l	law, whether you now own, opera	te, or utilize it or used
	Haza		vironmental law defines as a hazardous	waste, hazardous substance, tox	kic substance,
Rep	ort all	l notices, releases, and proceedings th	nat you know about, regardless of wher	they occurred.	
24.	Has	any governmental unit notified you tha	at you may be liable or potentially liable	under or in violation of an enviro	nmental law?
		No			
	_	Yes. Fill in the details.			
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit o	f any release of hazardous material?		
		No			
		Yes. Fill in the details.			
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlemer	nts and orders.
		No			
		Yes. Fill in the details.			
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business		
27.	Withi	in 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connections to	anv business?
			in a trade, profession, or other activity,		,
			pany (LLC) or limited liability partnersh		
		☐ A partner in a partnership		•	
		☐ An officer, director, or managing ex	recutive of a corporation		
		☐ An owner of at least 5% of the votin	ng or equity securities of a corporation		

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc

Main Document

Date Issued

Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57

Page 43 of 55

Case 2:19-bk-21516-BR

Debtor 1 Cheryn Roff

Name

Address

(Number, Street, City, State and ZIP Code)

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc Main Document Page 44 of 55

Fill in this infor	mation to identify your o	:3SP'		
Debtor 1	Cheryn Roff		·	
200101	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA	
Case number				
(if known)			197	Check if this is an amended filing
Be as complete	of Financial A	e. If two married people	riduals Filing for Bankru	esponsible for supplying correct
	nore space is needed, at n). Answer every questi		to this form. On the top of any addition	al pages, write your name and case
Part 12: Sign	Below	 		
are true and con with a bankrupto	rect. I understand that m	iaking a false statemen	and any attachments, and I declare und it, concealing property, or obtaining m iprisonment for up to 20 years, or both	ler penalty of perjury that the answers oney or property by fraud in connection
Cheryn Roff Signature of De	btor 1	Signa	ature of Debtor 2	
•	130/19	Date		
Did you attach a ■ No □ Yes	dditional pages to Your	Statement of Financial	Affairs for Individuals Filing for Bankı	uptcy (Official Form 107)?
	gree to pay someone wi	no is not an attorney to	help you fill out bankruptcy forms?	
■ No □ Yes, Name of	Dareon Attach the	- Bankruntov Balitica De-	anararia Nation Declaration and Street	o (Official Forms 440)
L res. Name of	reison Attach the	s pankrupicy Pelition Pre	eparer's Notice, Declaration, and Signatui	e (Oniciai Form 119).

Fill in this inform	nation to identify your	case:			
Debtor 1	Cheryn Roff				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	CENTRAL DIST	RICT OF CALIFORNIA		
Case number _					
(if known)				[☐ Check if this is an
					amended filing
O#:-:-1 F	400				
Official For					
Statemen	<u>it of Intentio</u>	<u>n for Indiv</u>	<u>/iduals Filing Und</u>	ler Chapter 7	12/15
_	vidual filing under chap claims secured by you	=	Il out this form if:		
_	ed personal property a	• • • • • • • • • • • • • • • • • • • •	ot avnirad		
You must file this	form with the court were is earlier, unless th	ithin 30 days after	you file your bankruptcy petition e time for cause. You must also	n or by the date set for the send copies to the credite	e meeting of creditors, ors and lessors you list
If two married peo	ople are filing together d date the form.	in a joint case, bo	oth are equally responsible for su	upplying correct informati	on. Both debtors must
Be as complete a write yo	nd accurate as possib our name and case nun	le. If more space inber (if known).	s needed, attach a separate shee	t to this form. On the top	of any additional pages,
Part 1: List Yo	us Craditara Milaa Haus	. Control Claims			
LIST TO	ur Creditors Who Have	s Secured Claims			
 For any credito information bel 	rs that you listed in Pa	ert 1 of Schedule D	: Creditors Who Have Claims Se	cured by Property (Officia	al Form 106D), fill in the
Identify the cre	ditor and the property th	The second secon	What do you intend to do with secures a debt?		id you claim the property sexempt on Schedule C?
Creditor's Ch	nase Mortgage		☐ Surrender the property.] No
name:			Retain the property and rede		_
Description of	776 Mansfield Dr. (Claremont	☐ Retain the property and ente Reaffirmation Agreement.	r into a	Yes
property	CA 91711 Los Ang		Retain the property and [expl	lain1·	
securing debt:	Needs new kitchen		- Notain the property and lexpi	ianij.	
	Nothing has been usince the 1987	правтеа	Continue making paymen	nts	
Part 2: List Yo	ur Unexpired Personal	Property Leases	in Schedule G: Executory Contra	acts and Unavnired Lagr	og (Official Form 1000) #ill
in the information	ı below. Do not list rea	l estate leases. Ur	expired leases are leases that ar	re still in effect: the lease	period has not yet ended.
You may assume	an unexpired persona	I property lease if	the trustee does not assume it. 1	i1 U.S.C. § 365(p)(2).	•
Describe your ur	expired personal prop	erty leases	an a	Will th	e lease be assumed?
Lessor's name: Description of leas	sed			□ No	
Property:				□ Ye:	S
Lessor's name: Description of leas	sed			□ No	
Property:				□ Ye	s
				□ 16	<u>-</u>

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Cheryn Roff	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes

Fill in this inforn	nation to identify your	case:			
Debtor 1	Cheryn Roff First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case number(If known)					Check if this is an amended filing
Official For		n for Individu	ıals Filing Unde	· Chapter 7	12/15
Under penalty of property that is s	perjury, I declare that ubject to an unexpire¢	have indicated my inter	ition about any property of my	estate that secures a	debt and any personal
X Cheryn Ro Signature of		B —	X Signature of Debtor	2	
Date	9/30/19		Date		

Case 2:19-bk-21516-BR

Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Desc

B2030 (Form 2030) (12/15)

Main Document Page 48 of 55

United States Bankruptcy Court Central District of California

In re	Cheryn Roff		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR DE	EBTOR(S)
c	arsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 impensation paid to me within one year before the fit erendered on behalf of the debtor(s) in contemplation	ling of the petition in bankrupte	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	****	\$	1,500.00
	Prior to the filing of this statement I have received	d	\$	1,500.00
	Balance Due		\$	0.00
2. \$	335.00 of the filing fee has been paid.			
3. Т	ne source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
1. T	ne source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed con	npensation with any other perso	n unless they are mem	bers and associates of my law firm.
5. I a. b. c.	I I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the natural return for the above-disclosed fee, I have agreed to Analysis of the debtor's financial situation, and remember and filing of any petition, schedules, standard Representation of the debtor at the meeting of credit [Other provisions as needed]	ames of the people sharing in the render legal service for all aspedering advice to the debtor in deatement of affairs and plan which	ne compensation is attacts of the bankruptcy of the bankruptcy of the continuity whether to the continuity be required:	ched. ase, including: file a petition in bankruptcy;
7. В	agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding.	ee does not include the following ischargeability actions, jud	ng service: dicial lien avoidance	es, relief from stay actions or
		CERTIFICATION		
this ba $\frac{1}{Da}$	ertify that the foregoing is a complete statement of a akruptcy proceeding. 7/30//5	ny agreement or arrangement for Todd Turoci 160		epresentation of the debtor(s) in
_ w		Signature of Attorn THE TUROCI FII 3845 Tenth Stre Riverside, CA 9	ney RM et 2501 Fax: (866) 762-0618	3

	W- W -				
Fill in this in	formation to identify your case:		Check on	e box only as o	lirected in this form and in Form
Debtor 1	Cheryn Roff		122A-1St	ipp:	
Debtor 2 (Spouse, If filling)		■ 1. T	here is no pres	umption of abuse
United State	es Bankruptcy Court for the: Central District of	California	8	applies will be r	to determine if a presumption of abuse nade under <i>Chapter 7 Means Test</i>
Case number	er			•	icial Form 122A-2).
(II KIIOWII)			☐ 3. T	he Means Test qualified militar	does not apply now because of y service but it could apply later.
			□ Ch	eck if this is a	n amended filing
<u>Official</u>	Form 122A - 1				
Chapte	r 7 Statement of Your Cu	rrent Monthly	y Incom	е	12/15
attach a separ case number (qualifying mili	te and accurate as possible. If two married people rate sheet to this form. Include the line number to vit fix the sheet to this form. Include the line number to vit fix the sheet to the sheet to the sheet	which the additional inform a presumption of abus otion from Presumption of	rmation applies. se because vou	On the top of a	ny additional pages, write your name and
	s your marital and filing status? Check one or	ıly.			
_	married. Fill out Column A, lines 2-11.				
	ried and your spouse is filing with you. Fill o				
	ried and your spouse is NOT filing with you.				
	iving in the same household and are not lega				
p	iving separately or are legally separated. Fill penalty of perjury that you and your spouse are l wing apart for reasons that do not include evadi	egally separated under	nonbankruptc	/ law that appli	es or that you and your spouse are
101(10A), F the 6 month	average monthly income that you received from all For example, if you are filing on September 15, the 6-m ns, add the income for all 6 months and divide the total on the same rental property, put the income from that p	ionth period would be Mar by 6, Fill in the result, Do	ch 1 through Aug not include anv i	ust 31. If the amo	ount of your monthly income varied during ore than once. For example, if both
			Colun Debt o		Column B Debtor 2 or non-filing spouse
	ross wages, salary, tips, bonuses, overtime, deductions).	and commissions (be	efore all \$	1,180.44	\$
	ny <mark>and maintenance payments. D</mark> o not include n B is filled in.	payments from a spou	se if \$	0.00	\$
of you from an and roo	ounts from any source which are regularly pa or your dependents, including child support a unmarried partner, members of your household ommates. Include regular contributions from a sp . Do not include payments you listed on line 3.	. Include regular contrit I, your dependents, par	outions rents.	0.00	\$
5. Net inc	ome from operating a business, profession,	or farm			
		Debtor 1			
	eceipts (before all deductions)	\$0.00			
	y and necessary operating expenses	-\$ 0.00	L	0.00	
	nthly income from a business, profession, or far	m \$0.00 Copy	here -> \$	0.00	\$
o. Net inc	ome from rental and other real property	Debtor 1			
Gross r	receipts (before all deductions)	\$ 0.00			
	y and necessary operating expenses	-\$ 0.00			
	nthly income from rental or other real property	· ———	here -> \$	0.00	\$
	t dividends and royalties	·	\$	0.00	\$

Debtor 1	Cheryn Roff			Case	number (if known)			
				Colum Debto		Column B Debtor 2 o non-filing		
8. Uı	nemployment compensation			\$	0.00	\$		
	o not enter the amount if you contend that the amoun e Social Security Act. Instead, list it here:	t received wa	s a benefit un	der	·			-
	For you \$	i	1,500.00					

9. Pe be	ension or retirement income. Do not include any ar enefit under the Social Security Act.	nount receive	d that was a	\$	500.00	\$		
Do re- do	come from all other sources not listed above. Spen not include any benefits received under the Social Spenyed as a victim of a war crime, a crime against humestic terrorism. If necessary, list other sources on a labelow.	Security Act or manity, or inte	r payments ernational or					
	•			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.			+ \$	0.00	\$		
	ch column. Then add the total for Column A to the to Determine Whether the Means Test Applies to	tal for Column		1,680.4	<u>+</u> + <u>+</u> + <u>-</u>		Total incor	1,680.44
12. Ca	sculate your current monthly income for the year	. Follow these	steps:			_		
12	a. Copy your total current monthly income from line	11			Copy line 11 l	nere=>	\$	1,680.44
	Multiply by 12 (the number of months in a year)						×	12
12	b. The result is your annual income for this part of th	e form				12b	. \$	20,165.28
13. C a	alculate the median family income that applies to	you . Follow th	nese steps:					
Fil	I in the state in which you live.	CA						
Fil	in the number of people in your household.	1						
	In the median family income for your state and size					13.	\$	57,962.00
To	find a list of applicable median income amounts, go this form. This list may also be available at the bank	online using t	he link specifi	ed in the s	eparate instruc	tions		
14. Hc	ow do the lines compare?							
14	a. Line 12b is less than or equal to line 13. O		age 1, check l	oox 1, Ther	e is no presum	ption of abus	е.	

Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.

Go to Part 3 and fill out Form 122A-2.

Case 2:19-bk-21516-BR Doc 1 Filed 09/30/19 Entered 09/30/19 13:03:57 Des Main Document Page 51 of 55

Fill in this info	rmation to identify your case	Э;
Debtor 1	Cheryn Roff	
Debtor 2 (Spouse, if filing)		
United States	Bankruptcy Court for the:	Central District of California
Case number (if known)		

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

If you checked line 14b, fill out Form 122A-2 and file it with this form.

12/15

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X
Cheryn Roff
Signature of Debtor 1

Date
1/30//9

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

Case 2:19-bk-21516-BR Doc 1 Filed	
Attorney or Party Name, Address, Telephone & FAX Nos State Bar No. & Email Address Todd Turoci 160059 3845 Tenth Street Riverside, CA 92501 (888) 332-8362 Fax: (866) 762-0618 California State Bar Number: 160059 CA mail@theturocifirm.com	FOR COURT OSE ONLY
D. Cahtawa)	
□ Debtor(s) appearing without an attorney ■ Attorney for Debtor	
	BANKRUPTCY COURT RICT OF CALIFORNIA CASE NO.: CHAPTER: 7
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]
Debtor(s).	[EBIX 1007-1(a)]
	orney if applicable, certifies under penalty of perjury that the consisting of 3 sheet(s) is complete, correct, and li responsibility for errors and omissions. Signature of Debtor 1
Date:	Signature of Debtor 2 (joint debtor)) (if applicable)
Date:	
	Signature of Attorney for Debtor (if applicable)

Cheryn Roff 776 Mansfield Dr. Claremont, CA 91711

Barclays Bank Delaware Attn: Correspondence Po Box 8801 Wilmington, DE 19899

Caltech Employees Fcu 528 Foothill Blvd La Canada, CA 91011

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Mortgage Attn: Bankruptcy Dept Po Box 24696 Columbus, OH 43224

Citibank/Best Buy Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179

Comenity Capital Bank/HSN Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Equity Experts c/oThe Club Homeowners Association 6632 Telegraph Road, Suit #339 Bloomfield Hills, MI 48301 Franchise Tax Board Bankruptcy Section, MS: A-340 PO Box 3952 Sacramento, CA 95812-2952

Internal Revenue Service Official Noticing Address for BK POB 7346 Philadelphia, PA 19101-7346

National Bank/Macy's Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Nordstrom FSB Attn: Bankruptcy Po Box 6555 Englewood, CO 80155

SYNCB/Texaco Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank / HH Gregg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Synchrony Bank/QVC Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Verizon Wireless Bankruptcy Admini 500 Technology Dr, Ste 550 Weldon Spring, MO 63304

Wells Fargo Bank NA Attn: Bankruptcy 1 Home Campus Mac X2303-01a Des Moines, IA 50328